Send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(571) 273-2885 or Fax

INSTRUCTIONS: Talk form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All faither correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unitable precise below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

23504

7590

07/29/2005

WEISS & MOY PC **4204 NORTH BROWN AVENUE** SCOTTSDALE, AZ 85251

08/16/2005 RMEBRAH1 00000067 10677440

01 FC:2501 02 FC:1504

700.00 DP 300.00 DP Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Depositor's name))	an Brown	Joi
(Signature)	1	Dairle	7
(Date)		11-05	8-\
		1	

С.

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/677,440	10/02/2003	Daniel Aljadeff	 3842P2494CIP	9018

TITLE OF INVENTION: METHOD AND SYSTEM FOR SYNCHRONIZING LOCATION FINDING MEASUREMENTS IN A WIRELESS LOCAL AREA NETWORK

APPLN. TYPE	SMALL ENTITY	_ ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700		\$300	\$1000	10/31/2005
EXAM	IINER	ART UN	TIT .	CLASS-SUBCLASS	1	
LY, N	LY, NGHI H 2686			455-456100	-	
CFR 1.363). Change of correspond Address form PTO/SB/1. "Fee Address" indica PTO/SB/47; Rev 03-02 Number is required. ASSIGNEE NAME AND PLEASE NOTE: Unless	e address or indication of "F. dence address (or Change of 22) attached. tion (or "Fee Address" Indicator more recent) attached. Use D RESIDENCE DATA TO Be an assignee is identified be a 37 CFR 3.11. Completion	Correspondence ation form e of a Customer E PRINTED ON 7 clow, no assignee	(1) the na or agents (2) the na registered 2 registere listed, no	pear on the patent. If an assign	a member a nes of up to no name is 1A. M	Moy & Harris,
(A) NAME OF ASSIGN AeroScout, I		(E	,	CE:(CITY and STATE OR CO ot, Israel	UNTRY)	
Please check the appropriate	assignee category or catego	ries (will not be pr	inted on the p	patent): 🗖 Individual 🛣	orporation of other private	group entity Government
4a. The following fee(s) are	enclosed:	41	. Payment of	` '		
XX Issue Fee		A check in the amount of the fee(s) is enclosed.				
Publication Fee (No s	mall entity discount permitte					
Advance Order - # or	Copies		The Director is hereby authorized by charge the required fee(s), or credit any overpaymen Deposit Account Number $23-0830$ (enclose an extra copy of this form).			
_ ` '	(from status indicated above MALL ENTITY status. See	,	_		LL ENTITY status. See 37	

anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature . Mitchell\Harris Typed or printed name

8 - 11 - 05

42,638 Registration No.

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

, , ,	ons are required to respond to a constant Application Number	ollection of in	Approved for use through 07/31/2006. OMB 0651-0 Trademark Office; U.S. DEPARTMENT OF COMMER afternation unless it displays a valid OMB control number of 7.7, 4.4.0	
TRANSMITTAL	Filing Date		2-03	
FORM	First Named Inventor		adeff	
	Art Unit	268		
(to be used for all correspondence after initial filing)	' Examiner Name	Ly	0	
	Attorney Docket Number	3842P2494CIP		
Total Number of Pages in This Submission 4		304	212494011	
EN	CLOSURES (Check all	that appl	y)	
Fee Transmittal Form	Drawing(s)		After Allowance Communication to T	
Fee Attached	Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences	
Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53	Petition Petition to Convert to a Provisional Application Power of Attorney, Revocatio Change of Correspondence A Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD arks	Address	Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): Issue Fee Transmittal Check #13720 - \$1,000 Return Postcard	
9" SIGNATURE	OF ADDI ICANT ATTO	DNEW O	ND A OFFICE	
irm Name	OF APPLICANT, ATTO	NET, U	AGENI	
Weiss, Moy & Ha	rris, P.C.			
signature (Distribute	& Hours			
rinted name A. Mitchell har:				
8-11-05	R	leg. No.	42,638	
CERTIFIC	CATE OF TRANSMISSI	ON/MAII	LING	

Signature Date 8-11-05

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Brown

Typed or printed name